

**Rocky Mount Fire Department
Citizen's Fire Academy
Application**

**Mail application to: Kim Wittig – 375 E. Raleigh Blvd. – Rocky Mount, NC 27801
or Fax to 972-1670 **APPLICATION DEADLINE: September 4, 2014****

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First Name

Middle Name

Last Name

--

Driver's License or ID #

State

--

--

Social Security #

Alias or Nicknames

--

Mailing Address

Street

City

State

Zip Code

--

--

Date of Birth

Place of Birth

--

Occupation (If retired give past profession)

Employer

of years

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Work Telephone Number

Home or Cell Telephone Number

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Describe any Fire Service experience you have

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List any special fire service interest/activities you have

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List the reason(s) you wish to attend the Citizen's Fire Academy

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Will you be able to attend all 10 weeks of class from 6-9 pm on Monday Nights?

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Have you been arrested/convicted of a crime? If yes, give the date(s) and explain.

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Do you have any physical limitations or restrictions? If yes, please describe.

List 3 personal references (include complete names and addresses along with city, state, zip code, and telephone number.

Name	Address	Telephone Number
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Name	Address	Telephone Number
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Name	Address	Telephone Number
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Give the name, the relationship, address, and telephone number of a person to contact in case of emergency.

Name	Relationship	Address	Telephone Number
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Please note that all applicants are subject to a Criminal History Investigation

I certify that all the information I have provided is true and valid and I understand that any misstatement of material facts in this application will be cause for disqualification from participation in the Citizen's Fire Academy.

Applicant Signature	Date
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